

Guidelines for Development of a Home Health Agency

1. Appoint Governing Body.
2. Form group of professional advisory personnel - at least one (1) practicing physician and one (1) registered nurse and appropriate representation from other professional disciplines. Develop policies and bylaws for group defining authority and responsibilities. Evidence of this group's involvement in the development of the agency is required.
3. Select qualified administrator. Send qualifications with policy manual.
4. Select supervising R.N. and personnel for other services and establish personnel records for each (including administrator.)
5. Develop organizational structure and chart.
6. Develop bylaws, policies, budget, and procedure manuals.
7. Develop job descriptions, personnel policies, contracts for services such as physical therapists (P.T.) or speech therapists (S.T.), etc.
8. Orientation plan for all personnel.
9. Inservice plan for all personnel.
10. Develop patient medical record system.
11. Obtain governing body written approval of all aspects of agency orientation.
12. Request telephone consultation from state agency as needed prior to certification visit.
13. **Submit both federal and licensure application papers with Missouri Department of Health and Senior Services, Bureau of Home Care and Rehabilitative Standards.** A copy of the Secretary of State Corporate Good Standing Certificate and fictitious registration (if applicable) must accompany the license application to assure compliance with state corporate registration requirements.
14. Applicant is granted permission to develop patient caseload after approval is received for the agency's policy manual and the General Enrollment Application (CMS-855) form has been reviewed and approved by the fiscal intermediary.
15. Develop a patient caseload whose care will be reviewed during the certification visit (You are not allowed to bill Medicare/Medicaid eligible patients prior to survey date.) In conjunction, establish MCDN connection and transmit test OASIS data.
16. An unannounced certification visit will be made when agency is operational and admitting patients. The agency must have provided care to ten patients with at least seven patients on service at the time of survey. During the start up period, agency shall provide at least two services, one of which must be its direct service.